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district; on the contrary from this point of view hereditary predisposition and syphilis seemed to him to be of manifestly greater importance.

Marie and Bonnet expressed similar views from personal statistical data, that especially alcohol more frequently than other poisons (lead, mercury, morphine), but in the same way as these, contributed to the development of the disease in the hereditarily affected.

Combemale referred to his observations made first at Montpellier and then at Lille on dogs that he had accustomed continually to alcohol drinking; between the fourth and eleventh months these animals manifested a series of characteristic physical and mental symptoms, and showed at the autopsy the same signs as progressive paralysis.

Christian disputed this similarity, and thought that in these cases there was probably an encephalitis which differed anatomically from the meningo-encephalitis of progressive paralysis.

MARIE, *Contribution à l'étude des troubles oculaires dans la paralysie générale*, Thèse de Paris 1890, No. 349.

The thesis of Dr. Marie contains nothing that is not already known about ocular troubles in general paralysis. His conclusions are that:

1. Ocular troubles (ophthalmoplegias, amauroses, etc.) are frequent in general paralysis. They have a special importance in that they may precede by several years the beginning of the affection.

2. These early troubles are transitory and incomplete in character.

3. Post-mortem examinations show that the initial diffusion of the lesion of general paralysis extends to the peripheral nervous system as well as to the portions of the cerebro-spinal axis.

#### *Confusional Insanity.*

In his review of Mental Diseases for 1891, in the Annual of the Universal Medical Sciences, Dr. Brush, in referring to the article by Connolly Norman on the subject of Confusional Insanity (see this JOURNAL, iv. p. 326), comments as follows on Wood's use of this term:

"It seems to us that Wood has somewhat overshot the mark in his attempt to simplify the nomenclature of insanity and its classification, and has incurred the risk of confusing distinct clinical forms of mental disorder. The term "stuporous insanity," for example, while applicable to a class of cases etiologically of the same origin, physical or mental exhaustion, disturbed nutrition or malnutrition, and auto-intoxication, conveys to the clinical alienist the idea of a class widely differing, in its clinical picture, from some of the cases he attempts to group together. The term "stuporous," while it describes an apparent state, is, we think, an unfortunate one. The majority of the cases are not stupid, but, on the contrary, alert and watchful. In some an overwhelming delusion of terror dominates, as it were, the patient, and prevents all attempts at spontaneity. In others, the impressions are normally received and interpreted, but response cannot be evoked. The patient is in some sense mentally paralyzed, but he is not stupid. We doubt not, indeed we know from observation, that cases which have been classed under the head of "confusional insanity" were able to carry on distinct trains of reasoning, starting, it must be admitted, from false premises, but arriving at distinct conclusions; and these same cases have, after convalescence, been able to clearly recall the events and ideas of the so-called confusional period."

IRELAND, *Torquato Tasso; a psychological study*, Alienist and Neurolologist, 1891 XII. 477.

This study is based upon the various lives of the poet Tasso, which we possess in Italian and in English. The writer calls special attention

to the fact that, in the case of this great and unfortunate man, we have fairly trustworthy data concerning his childhood, and are not left in complete ignorance of his ancestry. The vicissitudes of his family were not without their influence upon a child naturally precocious, and it is probable that the seeds of the melancholia, which afflicted him, were early sown. Tasso was a poet at seventeen, and, by the time his great work was ready for publication, the sensitive young man had suffered much from critics and censors. Dr. Ireland points out that the complaints of persecution, made by the poet, remind us of the similar complaints of Jean Jacques Rousseau. We are given a description of Tasso's personal appearance, in which the following facts are to be noted: The orbits of the eyes were unusually large, the head large, the forehead high and sloping towards the top. He was short-sighted and had a slight stammer in his speech. From his own confession, he appears to have been over-indulgent in pleasures and rather fond of good wines. He had a tenacious memory, an unbounded ambition and love of glory, and a keen sense of injustice. He was proud, irritable, and deeply religious. And, added to all these, was the melancholia which often made him feel what he himself describes: "Something, I know not what, is whirling in my mind." These suspicions and aberrations made it impossible for his friends to ignore the affection which was evidently troubling him, so he was sent to a monastery to be taken care of by the monks, from which he escaped before his mental condition had much improved. While laboring under the idea that he was being persecuted, Tasso saw that many of his associates regarded him as insane. To the belief, widely current in Italy at the time, that the poet had gone mad through his love for the Princess Leonora. Dr. Ireland does not attach much credence. Some writers have held that the imprisonment of Tasso, which began in 1579, was the cause, instead of the result, of his mental derangement, but Dr. Ireland concludes that they fail to make out any good case. While in prison, Tasso was still in such a mental condition that he could bewail his misfortunes and overwhelm his friends with petitions. There can be little doubt of the poet's insanity at this time, for Tasso himself describes some "symptoms, the import of which no one acquainted with insanity can fail to read." He complains of the persecution of human and diabolical agencies, and is troubled by the apparition of spirits. His mind at times seems to have been much less unhinged than at others. His letter to Prof. Mercuriale, in the summer of 1583, contains his own account of his malady and the symptoms are unmistakable. Dr. Ireland concludes that Tasso was indeed affected with that form of insanity which is now called parenoia, characterized by a slow evolution of mental derangement, as shown by delusions of suspicion and persecution, hallucinations, and perversions of judgment. There appears to have been no hereditary neurosis in his family, but it is likely that the anxiety which Portia suffered before his birth and the griefs of his childhood helped the development of the mental derangement. After his release from prison the mind of Tasso seems still to have retained much of the great power that characterized it when unimpaired. The rest of the poet's life was filled with unhappiness and misfortune, and for two years, at least, after leaving his prison he was still subject to his strange delusions, and his actions at this time remind one of Swedenborg. He died, after a foreboding of his coming end, and after making the strange request that all the copies of the "Jerusalem Delivered," of which about twenty editions had been printed, should be gathered together and burned.

A. F. CHAMBERLAIN.